



Request For Variance

State Form 51184 (12/02)

Food Protection Program

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INDIANA STATE DEPARTMENT OF HEALTH

Telephone: 317/233-7360

FAX: 317/233-7334

FOOD PROTECTION PROGRAM
INDIANA STATE DEPT. OF HEALTH

1. Individual Submitting Request:

Date: 01 / 08 / 2012

Name: Ryan Edwards Telephone: (502) 876-1440 Fax: ()

Mailing Address: 405 Sunnyside Dr Email: ryanedwards@live.com

New Albany, IN 47150
P.O. Box City State Zip Code

2. Person/Organization Seeking Variance:

Name: Hoosier Iceman, LLC Email: ryanedwards@live.com

Mailing Address: 405 Sunnyside dr
Number & Street

New Albany, IN 47150
P.O. Box City State Zip Code

3. Food Establishment(s) for Which Variance is Sought

Include the following information for each food establishment: (List here or attach additional pages if necessary)

- Physical Location (if different than mailing address): Parking Lot of 2684 Charlestown Road, New Albany, IN 47150
- Mailing Address: 405 Sunnyside dr, New Albany, IN 47150
(Number, Street, City, State, & Zip Code)
- Telephone Number: (502) 876-1440 Fax Number: ()
- Person at each retail food establishment most responsible for supervising: Ryan Edwards

4. State how the proposal varies from each rule requirement, citing relevant rule sections by number:

(Attach additional pages if necessary)

Hoosier Iceman, LLC is locating an ice vending machine at the named location. The ice maker produces condensation. We are proposing the condensation be discarded through a "French Drain System". Any gray water which is produced through the process of sanitizing the machine and from the hand washing sink would be captured in a holding tank and discarded in an off-site sanitary sewer system. A valve will be used to separate the two. Section 375 Conveying Sewage.

5. Explain how the potential public health hazards and/or nuisances will be alternatively addressed by the proposal. Include supporting studies, Hazard Analysis Critical Control Point (HACCP) Plan(s), standard sanitation operating procedures, and/or any other evidence: (Attach additional pages, if necessary.)

It is standard that gray water is disposed of through a sanitary sewage system. We are disposing of the gray water by capturing it in a holding tank for future disposal. This method is identical to past variances granted by the Indiana State Department of Health for identical operations. Please refer to the following Variances; Ice Monster, LLC granted December 16, 2011, Ice for Less granted May 23, 2011, and Hoosier Iceman, LLC granted March 2009.

6. List how the proposal demonstrates the following (if applicable to the request):

A) How the proposal differs from what is common and usual in similar industry situations:

It is standard that gray water be disposed of through a sanitary sewage system. We are disposing of the gray water by capturing it in a holding tank for future disposal in a sanitary sewer.

B) How the proposal is unique and not addressed in existing rules or law:

There is very little gray water produced by this operation. The ice machine does not have a bathroom or restroom that produces a large amount of waste. The vast majority of water produced for disposal at this site will come from condensation during the ice making process.

C) How the proposal does not diminish the protection of public health:

The water being disposed of on site is condensation collected from humidity collecting on the refrigeration coils. The public and environment are not exposed to any additional pollutants.

D) How the proposal is based on new scientific or technological principle(s):

The water collected through the ice making process already exists in the environment as vapor. The French Drain is disposing of it as a liquid.

E) How the implementation of the variance would be practical:
The variance would prevent Hoosier Iceman, LLC from having to use a sanitary sewer system. A tap is available at the location but the use of it would be cost prohibitive and would not afford the environment or public any greater safety.

7. Explain how the person/organization seeking the variance will assure that all provisions of a granted variance will be enacted at each food establishment for which a variance has been granted:

The gray water is produced only when the machine is sanitized every six months. The process is conducted using a check list. The check list would include that the valve be switched to collect the gray water and its removal at the end of the sanitation process.

8. List all affected parties known by the person/organization seeking a variance, including all affected regulatory authorities: (Attach additional pages if necessary)

Floyd County Health Department and New Albany Plan and Building Commission.

9. Attach copies of any related variances, waivers or opinions issued by other governmental agencies.

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10. Signature of Individual Making Request:



Printed Name, Title: Ryan Edwards, President, Hoosier Iceman, LLC